

FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

| Title of Invention | System for Connecting Downhole Tools | | | | | | | | | | | | | | | | | | | | |
|--|--------------------------------------|-----------------|-------------|-------------|-------------|--------------------|-------------------|-----|------|--|-----|-------------------------|---|------|----|-----|--|--|--|--|--|
| Application Number : Date : First Named Applicant: Robert A. Parrott Attorney Docket Number: 22.1543 | | | | | | | | | | | | | | | | | | | | | |
| TOTAL FEE AUTHORIZED \$ 1588 Patent fees are subject to annual revisions on or about October 1st of each year. | | | | | | | | | | | | | | | | | | | | | |
| Filing as large entity BASIC FILING FEE | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>1001</td><td>770</td><td>770</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fees: \$ 770</td></tr></tbody></table> | | Fee Description | Fee Code | Amount \$ | Fee Paid \$ | Utility Filing Fee | 1001 | 770 | 770 | Subtotal For Basic Filing Fees: \$ 770 | | | | | | | | | | | |
| Fee Description | Fee Code | Amount \$ | Fee Paid \$ | | | | | | | | | | | | | | | | | | |
| Utility Filing Fee | 1001 | 770 | 770 | | | | | | | | | | | | | | | | | | |
| Subtotal For Basic Filing Fees: \$ 770 | | | | | | | | | | | | | | | | | | | | | |
| EXTRA CLAIM FEES | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 32</td><td>12</td><td>1202</td><td>18</td><td>216</td></tr><tr><td>Independent Claims : 10</td><td>7</td><td>1201</td><td>86</td><td>602</td></tr><tr><td colspan="5">Subtotal For Extra Claims Fees: \$ 818</td></tr></tbody></table> | | Fee Description | Extra Claim | Fee Code | Amount \$ | Fee Paid \$ | Total Claims : 32 | 12 | 1202 | 18 | 216 | Independent Claims : 10 | 7 | 1201 | 86 | 602 | Subtotal For Extra Claims Fees: \$ 818 | | | | |
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| Subtotal For Extra Claims Fees: \$ 818 | | | | | | | | | | | | | | | | | | | | | |
| AUTHORIZED BILLING INFORMATION The commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit account number: 500457 Access Code **** Deposit name: Schlumberger Technology Corporation Deposit authorized name: Bryan P. Galloway Signature: Bryan P. Galloway Date (YYYYMMDD): 2004-03-24 Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17. | | | | | | | | | | | | | | | | | | | | | |